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|---|--|------------------------|--|--|--|----------------------------|
| UTILITY PATENT APPLICATION TRANSMITTAL <small>For new nonprovisional applications under 37 CFR 1.53(b)</small> <small>2264</small> <small>U.S.P.T.O.</small> <small>030104</small> | | Attorney Docket No. | | R&H 04-02CIP | | |
| | | First Named Inventor | | SHERMER, David W. | | |
| | | Title | MICROSTRUCTURES COMPRISING A DIELECTRIC LAYER AND THIN CONDUCTIVE LAYER | | | |
| | | Express Mail Label No. | | EV325928046US | | Date Mailed: March 1, 2004 |
| APPLICATION ELEMENTS <small>See MPEP chapter 600 concerning utility patent application contents.</small> | | | ADDRESS TO: Commissioner of Patents Mail Stop Patent Application Alexandria, VA 22313-1450 | | | |
| 1. <input checked="" type="checkbox"/> | Fee Transmittal Form (Submit an original, and a duplicate for fee processing) | | 7. <input type="checkbox"/> | CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix) | | |
| 2. <input type="checkbox"/> | Applicant claims small entity status See 37 CFR 1.27 | | 8. <input type="checkbox"/> | Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary) | | |
| 3. <input checked="" type="checkbox"/> | Specification (preferred arrangement set forth below) | | a. <input type="checkbox"/> | Computer Readable Form (CRF) | | |
| | (Total Pages [14]) <ul style="list-style-type: none"> - Descriptive title of the Invention - Cross References to Related Applications - Statement Regarding Fed sponsored R&D - Reference to sequence listing, a table or a computer program listing appendix - Background of the Invention - Brief Summary of the Invention - Brief Description of the Drawings (if filed) - Detailed Description - Claim(s) - Abstract of the Disclosure | | b. <input type="checkbox"/> | Specification Sequence Listing on <ul style="list-style-type: none"> [] CD-ROM or CD-R (2 copies); or [] paper | | |
| 4. <input checked="" type="checkbox"/> | Drawing(s) (35 USC 113) | | c. <input type="checkbox"/> | Statement verifying identity of above copies | | |
| 5. <input checked="" type="checkbox"/> | Oath or Declaration | | 9. <input type="checkbox"/> | Assignment Papers (cover sheet & document(s)) | | |
| | | | 10. <input type="checkbox"/> | 37 CFR 3.73(b) Statement | <input checked="" type="checkbox"/> Power of Attorney (when there is an assignee) | |
| | a. <input checked="" type="checkbox"/> Newly executed (original or copy) b. <input type="checkbox"/> Copy from a prior application (37 CFR 1.63(d)) <small>(for continuation/divisional with Box 17 completed)</small> <ul style="list-style-type: none"> i. <input type="checkbox"/> DELETION OF INVENTOR(S) Signed Statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b). | | 11. <input type="checkbox"/> | English Translation Document (if applicable) | | |
| 6. <input type="checkbox"/> | Application Data Sheet See 37 CFR 1.76 | | 12. <input type="checkbox"/> | Information Disclosure Statement (IDS)/PTO-1449 | <input type="checkbox"/> Copies of Citations | |
| | | | 13. <input type="checkbox"/> | Preliminary Amendment | | |
| | | | 14. <input checked="" type="checkbox"/> | Return Receipt Postcard (MPEP 503) (Should be specifically itemized) | | |
| | | | 15. <input type="checkbox"/> | Certified Copy of Priority Document(s) (if foreign priority is claimed) | | |
| | | | 16. <input type="checkbox"/> | Request and certification for non-publication under 35 U.S.C. 122 | | |
| | | | 17. <input type="checkbox"/> | Other: _____ | | |

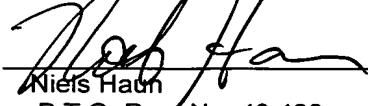
CONTINUING APPLICATION INFORMATION

This application is a **Continuation-in-part** of the following United States application which is incorporated herein by reference:

09/541,394, filed on March 31, 2000.

CORRESPONDENCE ADDRESS

Please address all correspondence to **Customer Number 000110** to the attention of the individual identified below.



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FEE TRANSMITTAL

Complete if known

Application Number: Not Yet Assigned

Filing Date: March 1, 2004

First Named Inventor: Sherrer

Group Art Unit:

Examiner Name:

Total Amt. of Payment: (1)+(2)+(3)= **\$770**

Attorney Docket Number: R&H 04-02CIP

| METHOD OF PAYMENT (check one) | | FEE CALCULATION (continued) | | | | | | | | | | | | | | | | | | | | | |
|--|-------------------------|--|-----|--|------|------|-----|--------------|----|-----|-----|--------------------|---|----|-----|--|--|--|--|--|-------------------------|--|--|
| 1. The Commissioner is hereby authorized to: <input type="checkbox"/> Charge indicated fees <input checked="" type="checkbox"/> Charge additional fees <input checked="" type="checkbox"/> Credit overpayments to the account of DANN, DORFMAN, HERRELL & SKILLMAN Deposit Account Number <u>04-1406</u> | | ADDITIONAL FEES Fee Description Fee Paid Surcharge-late filing fee or oath <u>0</u> Surcharge - late provisional filing fee or cover sheet Extension for response within first month Extension for response within second month Extension for response within third month Extension for response within fourth month Notice of Appeal Filing a brief in support of an appeal Request for oral hearing Petition to revive unavoidably abandoned application Petition to revive unintentionally abandoned application Issue fee Petitions to the Commissioner Petitions related to provisional applications Submission of Information Disclosure Stmt. Recording each patent assignment per property <u>0</u> Other fee (specify) <u>Advance Order (10 copies)</u> SUBTOTAL (3) \$0 | | | | | | | | | | | | | | | | | | | | | |
| 2. Payment enclosed: Check in the amount of <u>\$770</u> | | | | | | | | | | | | | | | | | | | | | | | |
| FEE CALCULATION 1. FILING FEE Fee Fee Description Utility filing fee <u>770</u> Design filing fee Plant filing fee Reissue filing fee SUBTOTAL (1) \$770 | | | | | | | | | | | | | | | | | | | | | | | |
| 2. <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th></th> <th style="text-align: center;">Paid</th> <th style="text-align: center;">Extr</th> <th style="text-align: center;">Fee</th> </tr> </thead> <tbody> <tr> <td>Total Claims</td> <td style="text-align: center;">20</td> <td style="text-align: center;">-20</td> <td style="text-align: center;">= 0</td> </tr> <tr> <td>Independent Claims</td> <td style="text-align: center;">3</td> <td style="text-align: center;">-3</td> <td style="text-align: center;">= 0</td> </tr> <tr> <td>Multiple Dependent (First presentation)</td> <td></td> <td></td> <td></td> </tr> <tr> <td></td> <td colspan="2" style="text-align: center;">SUBTOTAL (2) \$0</td> <td></td> </tr> </tbody> </table> | | | | | Paid | Extr | Fee | Total Claims | 20 | -20 | = 0 | Independent Claims | 3 | -3 | = 0 | Multiple Dependent (First presentation) | | | | | SUBTOTAL (2) \$0 | | |
| | Paid | Extr | Fee | | | | | | | | | | | | | | | | | | | | |
| Total Claims | 20 | -20 | = 0 | | | | | | | | | | | | | | | | | | | | |
| Independent Claims | 3 | -3 | = 0 | | | | | | | | | | | | | | | | | | | | |
| Multiple Dependent (First presentation) | | | | | | | | | | | | | | | | | | | | | | | |
| | SUBTOTAL (2) \$0 | | | | | | | | | | | | | | | | | | | | | | |

Submitted By:

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Printed Name Nils Haun

Reg. Number 48,488

Signature Nils Haun

Date March 1, 2004

Deposit Account User ID
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